



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Reed Hastings

Application No.:

10/613,516

Group:

2191

Filed:

July 3, 2003

Examiner:

R. P. Wang

Confirmation No.:

4785

For:

METHOD AND APPARATUS FOR MODIFYING RELOCATABLE  
OBJECT CODE FILES AND MONITORING PROGRAMS

CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
<u>10/5/06</u>	<u>Margaret A. Norcutt</u>
Date	Signature
<u>Margaret A. Norcutt</u>	
Typed or printed name of person signing certificate	

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

- [ ] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- [ ] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The claims fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	20	MINUS *	23	
INDEP	3	MINUS **	3	
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

\* not fewer than 20

\*\* not fewer than 3

## SMALL ENTITY

	RATE	ADDIT. FEE
X	\$ 25	\$
X	\$ 100	\$
+	\$ 180	\$

TOTAL= \$ 0

OTHER THAN  
SMALL ENTITY

	RATE	ADDIT. FEE
X	\$ 50	\$
X	\$ 200	\$
+	\$ 360	\$

TOTAL= \$ 0

The Application Size Fee has been calculated as shown below:

(Effective for cases filed on or after December 8, 2004)

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)

## SMALL ENTITY

Rate	Total Amount Owed
X \$125	\$[ ]

OTHER THAN  
SMALL ENTITY

Rate	Total Amount Owed
X \$250	\$[ ]

Payment  
Sufficient for  
up to

[ ] Sheets

### Petition for Extension of Time

[ ] Applicant hereby petitions to extend the time to respond to the [ ] dated [ ] for [ ] month(s) from [ ] to [ ]. The appropriate fee is set forth below.

**Please charge Deposit Account No. 08-0380 for the following fees:**

<input type="checkbox"/>	Petition for [ ] month Extension of Time	\$	_____
<input type="checkbox"/>	Claims Fee	\$	_____
<input type="checkbox"/>	Application Size Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>0</u>

**A check is enclosed in payment of the following fees:**

<input type="checkbox"/>	Petition for [ ] month Extension of Time	\$	_____
<input type="checkbox"/>	Claims Fee	\$	_____
<input type="checkbox"/>	Application Size Fee	\$	_____
<input checked="" type="checkbox"/>	Other Fees:		
	Terminal Disclaimer	\$	130
	IDS	\$	180
	TOTAL:	\$	<u>310</u>

☒ Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this letter is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Mary Lou Wakimura  
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Dated: 10/5/06